



PTO/SB/82 (09-03)

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Application Number	
Filing Date	5/20/96
First Named Inventor	Stephen Wren
Art Unit	3626
Examiner Name	A. Kalinowski
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.☐ A Power of Attorney is submitted herewith.*Applicant***OR**☐ I hereby appoint the practitioners associated with the Customer Number:

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OR

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I am the:☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Stephen Wren		
Signature	<i>Stephen Wren</i>		
Date	5-4-04	Telephone	314-895-4604

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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